



State of California  
Secretary of State

LIMITED LIABILITY COMPANY  
CERTIFICATE OF CANCELLATION

NOTE: Filing this Certificate of Cancellation (Form LLC-4/7) cancels the limited liability company's Articles of Organization or Application for Registration. However, to complete the cancellation the limited liability company must obtain a Tax Clearance Certificate from the California Franchise Tax Board.

**FILED**  
in the office of the Secretary of State  
of the State of California

JAN 03 2006

There is no fee for filing a Certificate of Cancellation.

IMPORTANT – Read instructions before completing this form.

This Space For Filing Use Only

<b>FILE NUMBER</b>	<b>ENTITY NAME</b> (Enter the exact name of the limited liability company.)
1. Secretary of State File Number 200010210021	2. Name of Limited Liability Company Earth Escapes, LLC

**TAX LIABILITY** (The following statement is required by statute and may not be altered.)

3. The tax liability will be satisfied on a taxes paid basis or a person, limited liability company, or other business entity assumes the tax liability, if any, of the dissolving limited liability company as security for the issuance of a Tax Clearance Certificate from the Franchise Tax Board and is responsible for additional taxes or fees, if any, that are assessed under the Revenue and Taxation Code and become due after the date of the assumption of tax liability.

**DISSOLUTION** (Domestic limited liability companies ONLY. Check the "YES" or "NO" box as applicable. Note: If the "NO" box is checked, a Certificate of Dissolution (Form LLC-3) must be filed prior to or together with this Certificate of Cancellation.)

4. The dissolution was made by a vote of all of the members. ☒ YES ☐ NO

**ADDITIONAL INFORMATION** (Enter any other information the managers or members filing the Certificate of Cancellation determine to include. Attach additional pages, if necessary. Additional information set forth on attached pages, if any, is incorporated herein by this reference and made part of this certificate. If no other information is to be included, leave Item 5 blank and proceed to Item 6.)

5.

**EXECUTION**

6 I declare I am the person who executed this instrument, which execution is my act and deed.

Signature of Authorized Person

12/1/05

Date

Anthony Eaton, Manager

Type or Print Name and Title of Authorized Person

Signature of Authorized Person

Date

Type or Print Name and Title of Authorized Person

**RETURN TO** (Enter the name and the address of the person or firm to whom a copy of the filed document should be returned.)

7. NAME	Stanley B. Schneider
FIRM	Gursey, Schneider & Co., LLP
ADDRESS	10351 Santa Monica Blvd. #300
CITY/STATE/ZIP	Los Angeles, CA 90025